

Docket No. HUBR-1261-US
----------------------------

### Declaration and Power of Attorney for Patent Application English Language Declaration

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

#### 7-AZAINDOLES AND THE USE THEREOF AS THERAPEUTIC AGENTS

The specification of which (check one)

☐ Is attached hereto.

☒ was filed on April 16, 2004 U. S. Serial No: 10/826,136

And was amended on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119(a)-(d) or Section 365(b) of any foreign applications(s) for patent or inventor's certificate, or Section 365(a) of any PCT international application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate or PCT international application having a filing date before that of the application on which priority is claimed.

#### Prior Foreign Application(s)

			Priority Not Claimed
<u>103 18 610.7</u> (Number)	<u>DE</u> (Country)	<u>April 24, 2003</u> (Filing Date)	<input type="checkbox"/>
_____ (Number)	_____ (Country)	_____ (Filing Date)	<input type="checkbox"/>
_____ (Number)	_____ (Country)	_____ (Filing Date)	<input type="checkbox"/>

I hereby claim the benefit under 35 U.S.C. Section 119(e) of any United States provisional application(s) listed below:

_____	_____
(Application Serial No.)	(Filing Date)
_____	_____
(Application Serial No.)	(Filing Date)
_____	_____
(Application Serial No.)	(Filing Date)

I hereby claim the benefit under 35 U.S.C. Section 120 of any United States application(s), or Section 365(c) of any PCT international application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. Section 112. I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, CFR, Section 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

_____	_____	_____
(Application Serial No.)	(Filing Date)	(Status)
		(patented, pending, abandoned)
_____	_____	_____
_____	_____	_____
(Application Serial No.)	(Filing Date)	(Status)
		(patented, pending, abandoned)

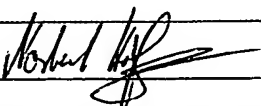
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

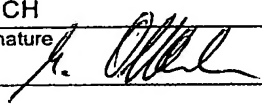
POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:


Peter F. Felfe, Reg. No. 20,297, Norman D. Hanson, Reg.No. 30,946, John A. Bauer, Reg. No. 32,554, James R. Crawford, Reg. No. 39,155, Andrew Im, Reg. No. 40,657 and Bruce K. Koch, Reg. No. 41,905 my attorneys with full power of substitution and revocation.

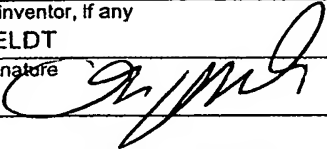
Send Correspondence to: James R. Crawford  
CUSTOMER NO. 24972  
Fulbright & Jaworski L.L.P.  
666 Fifth Avenue  
New York, New York 10103


Direct Telephone Calls to: James R. Crawford, 212-318-3148


Full name of first inventor, if any <b>Nobert HÖFGEN</b>	
First inventor's signature 	Date <b>14/05/2004</b>
Resident Hufenweg 1, 01458 Ottendorf-Okrilla, Germany	
Citizenship <b>Germany</b>	
Post Office Address  <b>SAME AS ABOVE</b>	
Full name of second inventor, if any <b>Hildegard KUSS</b>	
Second inventor's signature 	Date <b>17.05.04</b>
Resident Kieler Strasse 6, 01109 Dresden, Germany	
Citizenship <b>Germany</b>	
Post Office Address  <b>SAME AS ABOVE</b>	

Full name of third inventor, if any <b>Matthias OLBRICH</b>	
Third inventor's signature 	Date <b>17/05/2004</b>
Resident Kathe-Kollwitz-Str. 29, 01468 Moritzburg, Germany	
Citizenship <b>Germany</b>	
Post Office Address  <b>SAME AS ABOVE</b>	

Full name of fourth inventor, if any <b>Ute EGERLAND</b>	
Fourth inventor's signature 	Date <b>17/05/2004</b>
Resident Magdalenenstr. 1, 01445 Radebeul, Germany	
Citizenship <b>Germany</b>	
Post Office Address  <b>SAME AS ABOVE</b>	
Full name of fifth inventor, if any	

Full name of fifth inventor, if any Chris RUNDFELDT	
Fifth inventor's signature 	Date 17/05/04
Resident Melanchthonstr. 11, 01640 Coswig, Germany	
Citizenship Germany	
Post Office Address  SAME AS ABOVE	

Full name of sixth inventor, if any Karin STEINIKE	
Sixth inventor's signature 	Date 14/05/04
Resident Ledenweg 4c, 01445 Radebeul, Germany	
Citizenship German	
Post Office Address  SAME AS ABOVE	

Full name of seventh inventor, if any Rudolf SCHINDLER	
Seventh inventor's signature 	Date 17/05/04
Resident Pirnaer Landstr. 146, 01257 Dresden, Germany	
Citizenship German	
Post Office Address SAME AS ABOVE	